

Appendix K

Item-Specific Preventive and Responsive Analyses

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		NUMBER OF LICENSED NURSING STAFF STOPPED WORKING IN LAST 6 MONTHS	CQI PROTOCOL- BEHAVIORAL FUNCTIONS	CQI PROTOCOL- COMMUNICATION CHANGES	CQI PROTOCOL - BLADDER INCONTINENCE
		AS8A1	AS39E	AS39F	AS39G
BEH1	Behavior symptoms – high & low risk (CHSRA)				
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)		(.057) -.15	(.062) -.15	(.008) -.21
CAT2	Prevalence of indwelling catheter (CHSRA)				
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)		(.048) -.16	(.042) -.16	
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)		(.021) -.33		
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)		(.023) -.20		
CNT4	UTI -- Prevalence (CHSRA)	(.072) .14	(.089) -.13		
FAL1	Falls -- prevalence (LTCQ)				
INFX	Infections -- prevalence (MegaQI)	(.035) .17			
NUT1	Feeding tubes- - prevalence (Ramsey)				
BMIX	Low BMI -- prevalence (MegaQI)				
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)	(.056) .15			
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)				
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)	(.056) .15			
RES1	Physical restraints used daily (CHSRA)				(.028) .16
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)				
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)		(.042) -.16	(.027) -.18	(.070) -.15
ADL2	ADL worsening -- incidence (MegaQI)		(.017) -.20	(.000) -.29	(.028) -.18
ADL3	ADL improvement -- incidence (MegaQI)		(.039) -.24	(.089) -.20	
MOB1	Locomotion worsening – incidence (LTCQ)		(.075) -.15		(.056) -.16
WALX	Improvement in walking – incidence (MegaQI)		(.089) .15	(.068) .17	(.034) .19
COG1	Cognition worsening – incidence (LTCQ)		(.064) -.15	(.020) -.19	
COM1	Worsening communication – incidence (LTCQ)				
DELX	Delirium – incidence (MegaQI)				(.003) -.24
BEH4	Worsening behavior – incidence (LTCQ)				
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)				
CAT1	New insertion of indwelling catheter –				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		NUMBER OF LICENSED NURSING STAFF STOPPED WORKING IN LAST 6 MONTHS	CQI PROTOCOL- BEHAVIORAL FUNCTIONS	CQI PROTOCOL- COMMUNICATION CHANGES	CQI PROTOCOL - BLADDER INCONTINENCE
		AS8A1	AS39E	AS39F	AS39G
	incidence (LTCQ)				
CNT2	Worsening bowel continence -- incidence (LTCQ)				
CNT3	Worsening bladder continence -- incidence (LTCQ)		(.044) -.18	(.044) -.18	
PAN1	Pain worsening – incidence (LTCQ)		(.066) -.15	(.040) -.16	(.078) -.14
PRU4	Worsening pressure ulcers – incidence (LTCQ)				
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS DEPRESSION, MOODS AND ANXIETY	STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS DELIRIUM	STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS BLADDER CONTINENCE	CONTINUING EDUCATION FOR LICENSED NURSING STAFF IN BEHAVIORAL FUNCTION
		AS28BB3	AS28CB3	AS28DB3	AS28EB3
BEH1	Behavior symptoms – high & low risk (CHSRA)				(.088) -.16
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)				
CAT2	Prevalence of indwelling catheter (CHSRA)				
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)				
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)				
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)				
CNT4	UTI -- Prevalence (CHSRA)				
FAL1	Falls -- prevalence (LTCQ)		(.079) -.20	(.011) -.22	
INFX	Infections -- prevalence (MegaQI)				
NUT1	Feeding tubes- - prevalence (Ramsey)			(.054) -.17	
BMIX	Low BMI -- prevalence (MegaQI)			(.069) .16	
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)				
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)		(.093) -.18		
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)				
RES1	Physical restraints used daily (CHSRA)	(.023) .19	(.019) .23	(.000) .33	
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)				
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)	(.022) -.21	(.067) -.21		
ADL2	ADL worsening -- incidence (MegaQI)				
ADL3	ADL improvement -- incidence (MegaQI)				
MOB1	Locomotion worsening – incidence (LTCQ)	(.005) -.27	(.013) -.29		(.003) -.29
WALX	Improvement in walking – incidence (MegaQI)	(.005) .29	(.012) .32		(.008) .28
COG1	Cognition worsening – incidence (LTCQ)				
COM1	Worsening communication – incidence (LTCQ)				
DELX	Delirium – incidence (MegaQI)				
BEH4	Worsening behavior – incidence (LTCQ)				
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)				
CAT1	New insertion of indwelling catheter – incidence (LTCQ)	(.076) .16			(.025) .21
CNT2	Worsening bowel continence -- incidence (LTCQ)				
CNT3	Worsening bladder continence -- incidence (LTCQ)	(.066) -.19			

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS DEPRESSION, MOODS AND ANXIETY	STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS DELIRIUM	STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS BLADDER CONTINENCE	CONTINUING EDUCATION FOR LICENSED NURSING STAFF IN BEHAVIORAL FUNCTION
		AS28BB3	AS28CB3	AS28DB3	AS28EB3
PAN1	Pain worsening – incidence (LTCQ)				
PRU4	Worsening pressure ulcers – incidence (LTCQ)				
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS COMMUNICATION CHANGE	STANDARD ASSESSMENT TOOLS TO ROUTINEL Y ASSESS PAIN	RESTRAINT FREE MANAGEMENT DIRECTIVE IN FACILITY	CONTINUING EDUCATION FOR CNAs IN DELIRIUM , DEPRESSION, MOOD, ANXIETY
		AS28FB3	AS28HB3	AS34	AS26AA
BEH1	Behavior symptoms – high & low risk (CHSRA)				
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)				
CAT2	Prevalence of indwelling catheter (CHSRA)		(.087) .15		
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)			(.000) -.30	(.059) .15
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)				
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)			(.002) -.26	(.013) .21
CNT4	UTI -- Prevalence (CHSRA)				(.055) .15
FAL1	Falls -- prevalence (LTCQ)		(.058) -.16		
INFX	Infections -- prevalence (MegaQI)				
NUT1	Feeding tubes- - prevalence (Ramsey)				
BMIX	Low BMI -- prevalence (MegaQI)			(.046) -.16	
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)	(.089) .18			
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)				
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)				
RES1	Physical restraints used daily (CHSRA)	(.020) .22	(.002) .23	(.000) -.28	
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)			(.014) -.20	(.073) -.14
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)	(.003) -.31	(.020) -.20		
ADL2	ADL worsening -- incidence (MegaQI)	(.044) -.22	(.068) -.16		
ADL3	ADL improvement -- incidence (MegaQI)				(.088) -.20
MOB1	Locomotion worsening – incidence (LTCQ)	(.007) -.30	(.002) -.28		
WALX	Improvement in walking – incidence (MegaQI)	(.090) .20	(.009) .26	(.009) .23	
COG1	Cognition worsening – incidence (LTCQ)	(.046) -.21			(.043) -.16
COM1	Worsening communication – incidence (LTCQ)				(.054) -.15
DELX	Delirium – incidence (MegaQI)				(.066) -.15
BEH4	Worsening behavior – incidence (LTCQ)				
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)				
CAT1	New insertion of indwelling catheter – incidence (LTCQ)				
CNT2	Worsening bowel continence -- incidence				(.072) -.17

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS COMMUNICATION CHANGE	STANDARD ASSESSMENT TOOLS TO ROUTINEL Y ASSESS PAIN	RESTRAINT FREE MANAGEMENT DIRECTIVE IN FACILITY	CONTINUING EDUCATION FOR CNAs IN DELIRIUM , DEPRESSION, MOOD, ANXIETY
		AS28FB3	AS28HB3	AS34	AS26AA
	(LTCQ)				
CNT3	Worsening bladder continence -- incidence (LTCQ)				(.013) - .22
PAN1	Pain worsening – incidence (LTCQ)				
PRU4	Worsening pressure ulcers – incidence (LTCQ)			(.063) .16	
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		CONTINUING EDUCATION FOR CNAs IN BEHAVIOR FUNCTION	CONTINUING EDUCATION CLASSES FOR LICENSED NURSING STAFF IN BEHAVIORAL FUNCTION	CARE PLAN MEETINGS SCHEDULED INTO CNAS WORKDAY	WEEKLY VERBAL REPORTS FROM CNAS ON COMMUNICATION CHANGES
		AS26GA	AS26GB	AS11A	AS27D2
BEH1	Behavior symptoms – high & low risk (CHSRA)				
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)		(.035) -.17		
CAT2	Prevalence of indwelling catheter (CHSRA)				
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)				
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)				
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)	(.080) .15			
CNT4	UTI -- Prevalence (CHSRA)	(.064) .15			
FAL1	Falls -- prevalence (LTCQ)				(.047) -.16
INFX	Infections -- prevalence (MegaQI)				
NUT1	Feeding tubes-- prevalence (Ramsey)	(.060) .15		(.088) .14	
BMIX	Low BMI -- prevalence (MegaQI)	(.059) -.15	(.042) -.17		
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)	(.098) -.13		(.048) .16	
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)				
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)				
RES1	Physical restraints used daily (CHSRA)		(.065) .13		(.000) .25
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)			(.086) -.14	
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)				
ADL2	ADL worsening -- incidence (MegaQI)				
ADL3	ADL improvement -- incidence (MegaQI)			(.030) .25	(.060) -.22
MOB1	Locomotion worsening – incidence (LTCQ)				
WALX	Improvement in walking – incidence (MegaQI)				
COG1	Cognition worsening – incidence (LTCQ)			(.094) .14	
COM1	Worsening communication – incidence (LTCQ)			(.052) .16	
DELX	Delirium – incidence (MegaQI)	(.018) -.19	(.039) -.17		(.040) -.16
BEH4	Worsening behavior – incidence (LTCQ)			(.036) .17	
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)				
CAT1	New insertion of indwelling catheter – incidence (LTCQ)	(.604) -.04			(.041) -.16
CNT2	Worsening bowel continence -- incidence				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		CONTINUING EDUCATION FOR CNAs IN BEHAVIOR FUNCTION	CONTINUING EDUCATION CLASSES FOR LICENSED NURSING STAFF IN BEHAVIORAL FUNCTION	CARE PLAN MEETINGS SCHEDULED INTO CNAs WORKDAY	WEEKLY VERBAL REPORTS FROM CNAs ON COMMUNICATION CHANGES
		AS26GA	AS26GB	AS11A	AS27D2
	(LTCQ)				
CNT3	Worsening bladder continence -- incidence (LTCQ)			(.081) .16	(.099) -.15
PAN1	Pain worsening – incidence (LTCQ)			(.002) .24	
PRU4	Worsening pressure ulcers – incidence (LTCQ)			(.059) .16	
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RATIO OF CNAs TO LICENSED NURSES	USES CQI TO CONDUCT AN OVERALL REVIEW AND EVALUATION TO IMPROVE CARE	WHEN SUSPICIOUS AREA OF SKIN – SCHEDULE MORE FREQUENT SKIN EVALUATION	WHEN SUSPICIOUS AREA OF SKIN – SCHEDULE IN DEPTH RISK ASSESSMENT
		ccharat2	AS43D	AS30A	AS30B
BEH1	Behavior symptoms – high & low risk (CHSRA)				
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)			(.000) -.29	
CAT2	Prevalence of indwelling catheter (CHSRA)	(.000) -.29			
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)		(.007) -.21	(.005) -.22	
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)				
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)		(.024) -.19	(.029) -.19	
CNT4	UTI -- Prevalence (CHSRA)				(.060) -.15
FAL1	Falls -- prevalence (LTCQ)				
INFX	Infections -- prevalence (MegaQI)	(.038) -.17			
NUT1	Feeding tubes- - prevalence (Ramsey)			(.004) -.23	
BMIX	Low BMI -- prevalence (MegaQI)		(.006) -.22	(.082) -.14	
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)				
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)			(.006) -.21	
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)				(.008) -.21
RES1	Physical restraints used daily (CHSRA)				
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)				
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)		(.077) -.14		
ADL2	ADL worsening -- incidence (MegaQI)				
ADL3	ADL improvement -- incidence (MegaQI)				
MOB1	Locomotion worsening – incidence (LTCQ)				
WALX	Improvement in walking – incidence (MegaQI)				
COG1	Cognition worsening – incidence (LTCQ)		(.094) -.13		
COM1	Worsening communication – incidence (LTCQ)				
DELX	Delirium – incidence (MegaQI)				
BEH4	Worsening behavior – incidence (LTCQ)				(.074) -.14
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)				
CAT1	New insertion of indwelling catheter – incidence				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RATIO OF CNAs TO LICENSED NURSES	USES CQI TO CONDUCT AN OVERALL REVIEW AND EVALUATION TO IMPROVE CARE	WHEN SUSPICIOUS AREA OF SKIN – SCHEDULE MORE FREQUENT SKIN EVALUATION	WHEN SUSPICIOUS AREA OF SKIN – SCHEDULE IN DEPTH RISK ASSESSMENT
		ccharat2	AS43D	AS30A	AS30B
	(LTCQ)				
CNT2	Worsening bowel continence -- incidence (LTCQ)				
CNT3	Worsening bladder continence -- incidence (LTCQ)				
PAN1	Pain worsening – incidence (LTCQ)				
PRU4	Worsening pressure ulcers – incidence (LTCQ)				
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		PERCENT OF FAMILIES ATTENDING CARE PLAN MEETINGS	INQUIRIES OF RESIDENT FAMILIES OR STAFF REASONS FOR COGNITIVE CHANGES	INQUIRIES OF RESIDENT FAMILY OR STAFF FOR CHANGE IN BEHAVIOR	OBSERVES AND IDENTIFIES CHANGES IN EATING, SLEEPING, BOWELS, MOOD, BEHAVIOR, ACTIVITIES
		AS12A	AS18A	AS18C	AS18E
BEH1	Behavior symptoms – high & low risk (CHSRA)	(.000) -.27			
BEH2	Behavior symptoms – high risk (CHSRA)	(.002) -.25			
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)		(.028) -.17		
CAT2	Prevalence of indwelling catheter (CHSRA)				
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)				
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)			(.039) -.30	
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)				
CNT4	UTI -- Prevalence (CHSRA)		(.043) -.16	(.075) -.14	
FAL1	Falls -- prevalence (LTCQ)				
INFX	Infections -- prevalence (MegaQI)		(.059) -.15		
NUT1	Feeding tubes- - prevalence (Ramsey)	(.071) -.14			
BMIX	Low BMI -- prevalence (MegaQI)			(.006) -.22	
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)		(.034) -.17		
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)				
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)				(.087) -.14
RES1	Physical restraints used daily (CHSRA)	(.002) .22		(.093) -.12	
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)		(.093) -.13	(.092) -.13	(.051) -.16
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)				
ADL2	ADL worsening -- incidence (MegaQI)			(.003) -.24	
ADL3	ADL improvement -- incidence (MegaQI)			(.019) -.27	
MOB1	Locomotion worsening – incidence (LTCQ)				
WALX	Improvement in walking – incidence (MegaQI)				
COG1	Cognition worsening – incidence (LTCQ)		(.098) -.13	(.043) -.16	
COM1	Worsening communication – incidence (LTCQ)			(.017) -.19	
DELX	Delirium – incidence (MegaQI)		(.008) -.21	(.006) -.22	(.004) -.23
BEH4	Worsening behavior – incidence (LTCQ)				
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)				
CAT1	New insertion of indwelling catheter – incidence				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		PERCENT OF FAMILIES ATTENDING CARE PLAN MEETINGS	INQUIRIES OF RESIDENT FAMILIES OR STAFF REASONS FOR COGNITIVE CHANGES	INQUIRIES OF RESIDENT FAMILY OR STAFF FOR CHANGE IN BEHAVIOR	OBSERVES AND IDENTIFIES CHANGES IN EATING, SLEEPING, BOWELS, MOOD, BEHAVIOR, ACTIVITIES
		AS12A	AS18A	AS18C	AS18E
	(LTCQ)				
CNT2	Worsening bowel continence -- incidence (LTCQ)				
CNT3	Worsening bladder continence -- incidence (LTCQ)				
PAN1	Pain worsening – incidence (LTCQ)		(.046) -.16		
PRU4	Worsening pressure ulcers – incidence (LTCQ)				
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RESIDENT ROOMS PERSONALIZED WITH FURNITURE, PICTURES AND OTHER THINGS	WELL-LIGHTED COMMON AREAS	VARIETY OF ACTIVITIES FOR RESIDENTS WITH DIFFERENT CAPABILITIES	RESIDENTS UP AND OUT OF BED
		WAM1	WAM6	WAM11	WAM12
BEH1	Behavior symptoms – high & low risk (CHSRA)				
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)				
CAT2	Prevalence of indwelling catheter (CHSRA)	(.065) -.15			(.000) -.31
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)				(.011) -.20
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)			(.062) -.27	
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)				
CNT4	UTI -- Prevalence (CHSRA)				(.000) -.37
FAL1	Falls -- prevalence (LTCQ)			(.072) .14	
INFX	Infections -- prevalence (MegaQI)				(.000) -.28
NUT1	Feeding tubes- - prevalence (Ramsey)	(.020) -.19	(.001) -.25		(.002) -.25
BMIX	Low BMI -- prevalence (MegaQI)				
WGT1	Weight loss -- prevalence (LTCQ)			(.004) -.23	
PAIX	Inadequate pain management (MegaQI)				
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)	(.020) -.18		(.038) -.16	(.000) -.29
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)	(.000) .28			
RES1	Physical restraints used daily (CHSRA)	(.000) .24			
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)				
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)				
ADL1	Late loss ADL worsening – incidence (CHSRA)				(.095) -.13
ADL2	ADL worsening -- incidence (MegaQI)	(.049) -.16	(.071) -.15	(.031) -.18	(.003) -.24
ADL3	ADL improvement -- incidence (MegaQI)				
MOB1	Locomotion worsening – incidence (LTCQ)				
WALX	Improvement in walking – incidence (MegaQI)				
COG1	Cognition worsening – incidence (LTCQ)	(.060) -.15			
COM1	Worsening communication – incidence (LTCQ)				
DELX	Delirium – incidence (MegaQI)				
BEH4	Worsening behavior – incidence (LTCQ)				
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)	(.039) -.16	(.059) -.15		(.012) -.20
CAT1	New insertion of indwelling catheter – incidence (LTCQ)				(.000) -.28
CNT2	Worsening bowel continence -- incidence (LTCQ)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RESIDENT ROOMS PERSONALIZED WITH FURNITURE, PICTURES AND OTHER THINGS	WELL-LIGHTED COMMON AREAS	VARIETY OF ACTIVITIES FOR RESIDENTS WITH DIFFERENT CAPABILITIES	RESIDENTS UP AND OUT OF BED
		WAM1	WAM6	WAM11	WAM12
CNT3	Worsening bladder continence -- incidence (LTCQ)				
PAN1	Pain worsening – incidence (LTCQ)				(.006) -.22
PRU4	Worsening pressure ulcers – incidence (LTCQ)				
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RESIDENTS WALKING OR INDEPENDENTLY MOVING ABOUT THE FACILITY	STAFF HELP RESIDENT WITH FOOD AND LIQUIDS	CONTINUING EDUCATION FOR CNAs IN COMMUNICATION CHANGE	
		WAM17	WAM19	AS26FA	
BEH1	Behavior symptoms – high & low risk (CHSRA)				
BEH2	Behavior symptoms – high risk (CHSRA)				
BEH3	Behavior symptoms – low risk (CHSRA)				
SOC2	Little or no activity – prevalence (CHSRA)				
CAT2	Prevalence of indwelling catheter (CHSRA)	(.006) - .22			
CNT1	Bladder/bowel incontinence prevalence –high & low risk (CHSRA)	(.000) - .27			
CNT5	Bladder or bowel incontinence prevalence – high risk (CHSRA)		(.000) - .53		
CNT6	Bladder or bowel continence prevalence – low risk (CHSRA)	(.003) - .25			
CNT4	UTI -- Prevalence (CHSRA)	(.007) - .21			
FAL1	Falls -- prevalence (LTCQ)				
INFX	Infections -- prevalence (MegaQI)				
NUT1	Feeding tubes- - prevalence (Ramsey)	(.000) - .28			
BMIX	Low BMI -- prevalence (MegaQI)		(.000) .28		
WGT1	Weight loss -- prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)	(.081) .14			
PRU1	Pressure ulcers -- prevalence – high & low (CHSRA)	(.000) - .28	(.022) - .18		
BURX	Burns, skin tears or cuts --- prevalence (MegaQI)		(.095) .13		
RES1	Physical restraints used daily (CHSRA)				
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)				
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)				
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)	(.021) .20			
ADL1	Late loss ADL worsening – incidence (CHSRA)			(.077) - .14	
ADL2	ADL worsening -- incidence (MegaQI)	(.041) - .17	(.024) - .19		
ADL3	ADL improvement -- incidence (MegaQI)				
MOB1	Locomotion worsening – incidence (LTCQ)				
WALX	Improvement in walking – incidence (MegaQI)				
COG1	Cognition worsening – incidence (LTCQ)				
COM1	Worsening communication – incidence (LTCQ)				
DELX	Delirium – incidence (MegaQI)				
BEH4	Worsening behavior – incidence (LTCQ)				
MOD3	Depressed/Anxious mood worsening – incidence (LTCQ)	(.004) - .23	(.037) - .17		
CAT1	New insertion of indwelling catheter – incidence (LTCQ)	(.025) - .18	(.026) - .18		
CNT2	Worsening bowel continence -- incidence (LTCQ)	(.085) - .16			

Appendix Table Ka: Relationship Between Chronic Quality Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RESIDENTS WALKING OR INDEPENDENTLY MOVING ABOUT THE FACILITY	STAFF HELP RESIDENT WITH FOOD AND LIQUIDS	CONTINUING EDUCATION FOR CNAs IN COMMUNICATION CHANGE	
		WAM17	WAM19	AS26FA	
CNT3	Worsening bladder continence -- incidence (LTCQ)				
PAN1	Pain worsening – incidence (LTCQ)	(.016) -.19	(.076) -.14		
PRU4	Worsening pressure ulcers – incidence (LTCQ)			(.020) -.20	
ADLX	Restraints (physical) used daily – prevalence (CHSRA)				

Appendix Table Kb: Relationship Between Post Acute Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		RESTORATIVE/REHABILITATIVE AIDE ROUTINELY CONTRIBUTED TO CARE PLAN		RESTORATIVE PROGRAMS IN PLACE- PASSIVE RANGE OF MOTION	
		AS9D		AS21B	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	(.061) -.14		(.078) - .13	
ADLX	Failure to improve in ADLs (MegaQI)			(.000) .31	
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)			(.014) - .18	
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.000) -.30		(.000) - .27	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

** Reverse Coded

		RESTORATIVE PROGRAMS IN PLACE- ACTIVE RANGE OF MOTION		RESTORATIVE PROGRAMS IN PLACE- AMBULATION/GAIT TRAINING	
		AS21C		AS21D	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)	(.000) .28		(.001) .25	
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)	(.048) -.15		(.024) -.17	
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.000) -.27		(.000) -.30	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

		CQI PROTOCOL – DEHYDRATION		CQI PROTOCOL – BEHAVIORAL FUNCTION	
		AS39A		AS39E	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)	(.022) .18			
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)			(.041) -.15	
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.000) -.31		(.000) -.27	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)		(.066) - .26		
WALX	Maintenance or improvement in walking (MegaQI) **				

Appendix Table Kb: Relationship Between Post Acute Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		CQI PROTOCOL – COMMUNICATION CHANGE		INQUIRIES OF RESIDENT FAMILY OR STAFF FOR CHANGE IN BEHAVIOR	
		AS39F		AS18C	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)	(.037) .16		(.098) -.13	
CNTX	Failure to improve bladder continence (MegaQI)	(.019) -.18			
PAIX	Inadequate pain management (MegaQI)				
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.006) -.22			
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **			(.053) -.27	

		PROPORTION OF RESIDENTS RECEIVING EATING SWALLOWING, MEAL TRAINING		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS DEPRESSION, MOOD, AND ANXIETY	
		AS14CB		AS28BB3	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	(.066) -.14			
ADLX	Failure to improve in ADLs (MegaQI)			(.043) -.34	
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)	(.096) -.13		(.067) .16	
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)				
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS DELIRIUM		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS BLADDER INCONTINENCE	
		AS28CB3		AS28DB3	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)		(.024) -.45	(.099) -.14	(.076) -.28
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)	(.060) .20			
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)				
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

Appendix Table Kb: Relationship Between Post Acute Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS BEHAVIORAL FUNCTION		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS COMMUNICATIVE CHANGE	
		AS28EB3		AS28FB3	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)		(.035) - .35	(.095) - .16	(.009) - .43
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)				
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)				
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

		STANDARD ASSESSMENT TOOLS TO ROUTINELY ASSESS PAIN		RESTRAINT MANAGEMENT DIRECTIVE IN FACILITY	
		AS28HB3		AS34	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)		(.047) - .28		(.093) -.23
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)			(.094) .13	
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)			(.001) .25	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				(.031) -.30
WALX	Maintenance or improvement in walking (MegaQI) **				

		HOURS WORKED BY CNAs		CONTINUING EDUCATION FOR CNAS IN DELIRIUM, DEPRESSION, MOOD, ANXIETY	
		AS5CA		AS26AA	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	(.021) - .17		(.013) -.19	(.032) -.29
ADLX	Failure to improve in ADLs (MegaQI)				
CNTX	Failure to improve bladder continence (MegaQI)			(.068) -.14	
PAIX	Inadequate pain management (MegaQI)	(.020) - .17			
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.000) - .42		(.014) -.19	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)	(.023) - .17		(.091) -.13	
WALX	Maintenance or improvement in walking (MegaQI) **				

Appendix Table Kb: Relationship Between Post Acute Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		CONTINUING EDUCATION FOR CNAs IN BEHAVIOR FUNCTION		CNA ATTENDS CARE PLAN MEETING	
		AS26GA		AS10	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	(.007) -.20	(.018) -.32	(.073) -.13	(.075) -.24
ADLX	Failure to improve in ADLs (MegaQI)	(.035) .16			
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)			(.006) -.20	(.076) -.24
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.006) -.21		(.013) -.19	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)	(.012) -.19			
WALX	Maintenance or improvement in walking (MegaQI) **			(.086) .13	(.096) .23

		DAILY VERBAL REPORTS FROM CNA ON BEHAVIORAL FUNCTION		DAILY VERBAL REPORTS FROM CNA ON COMMUNICATION CHANGES	
		AS27B		AS27D	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	(.001) -.24	(.005) - .37		(.007) -.36
ADLX	Failure to improve in ADLs (MegaQI)				
CNTX	Failure to improve bladder continence (MegaQI)	(.075) -.14	(.072) - .25	(.011) - .20	(.041) -.28
PAIX	Inadequate pain management (MegaQI)				
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)				
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

		EDUCATION FOR LICENSED NURSING STAFF ON BEHAVIORAL FUNCTION		INQUIRE OF RESIDENT, FAMILY, OR STAFF REASONS FOR COGNITIVE CHANGE	
		AS26GB		AS18A	
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	(.049) - .15			
ADLX	Failure to improve in ADLs (MegaQI)				(.059) -.26
CNTX	Failure to improve bladder continence (MegaQI)				(.093) -.23
PAIX	Inadequate pain management (MegaQI)				
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.001) - .25			
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **	(.058) .15	(.090) .24		

Appendix Table Kb: Relationship Between Post Acute Indicators and Preventive Measures
(Note: Shading Indicates Items that are Counter to the Hypothesis)

		OBSERVES FOR AND IDENTIFIES CHANGES IN EATING, SLEEPING, BOWELS, MOOD, BEHAVIOR, ACTIVITIES	RESIDENT'S ROOM PERSONALIZED WITH FURNITURE, PICTURES AND OTHER THINGS		
		AS18E	WAM1		
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)			(.000) .31	(.024) .31
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)			(.002) - .23	
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)			(.000) - .36	
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)	(.021) -.18			
WALX	Maintenance or improvement in walking (MegaQI) **				

		HOMELIKE APPEARANCE OR FEELING			
		WAM9	WAM11		
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
ADLX	Failure to improve in ADLs (MegaQI)	(.009) .20			
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)	(.044) - .15		(.006) -.21	(.051) - .27
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.000) - .29			
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)				
WALX	Maintenance or improvement in walking (MegaQI) **				

		RESIDENTS UP AND OUT OF BED	STAFF HELPS RESIDENT WITH FOOD AND FLUIDS		
		WAM12	WAM19		
		ALL	TCU	ALL	TCU
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)		(.053) .26		
ADLX	Failure to improve in ADLs (MegaQI)	(.060) .14		(.029) - .17	
CNTX	Failure to improve bladder continence (MegaQI)				
PAIX	Inadequate pain management (MegaQI)	(.086) -.13			
PRUX	Failure to prevent/improve pressure ulcers (MegaQI)	(.001) -.26			
PRSPX	Failure to improve/prevent respiratory problems (MegaQI)		(.089) .24		
WALX	Maintenance or improvement in walking (MegaQI) **				

Appendix Table Kc. Summary of Relationship Between Chronic Quality Indicators and Responsive Validation Elements

		DOCUMENTATION OF COMPREHENSIVE ASSESSMENTS	ASSESSMENT BY PHYSICIAN	EVIDENCE OF PROBLEM/ISSUE (OTHER THAN CARE PLAN OR MDS)	DOCUMENTATION OF CHANGE IN RESIDENT STATUS
ADL1	ADL Decline (CHSRA)				
ADL2	ADL decline following improvement (MegaQI)				
ADL3	ADL improvement in residents with capacity (MegaQI)				
MOB1	Locomotion worsening (LTCQ)		(.092) .14		
WALX	Maintenance or improvement in walking (MegaQI)				
FAL1	Fall prevalence (LTCQ)				(.000) .28
COG1	Cognition worsening (LTCQ)	(.065) .15			(.003) .23
COM1	Worsening communication (LTCQ)			(.026) .18	(.007) .21
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
BEH1	Behavioral symptoms – high & low risk (CHSRA)	(.007) .22	(.002) .24		(.000) .29
BEH2	Behavioral symptoms – high risk (CHSRA)	(.053) .15	(.007) .21	(.001) .27	
BEH3	Behavioral symptoms – low risk (CHSRA)				
BEH4	Worsening behavioral Symptoms (LTCQ)				
MOD3	Depressed/Anxious mood worsening (LTCQ)				
SOC2	Little or no activity – prevalence (CHSRA)			(.080) .14	
CAT1	New insertion of indwelling catheter (LTCQ)	(.033) .17	(.040) .16	(.038) .16	(.044) .16
CAT2	Prevalence of indwelling catheter (CHSRA)	(.000) .56	(.000) .42	(.000) .59	(.034) .17
CNT1	Bladder incontinence (CHSRA)			(.000) .29	
CNT1	Bowel incontinence (CHSRA)			(.000) .43	
CNT2	Worsening bowel continence (LTCQ)			(.002) .26	
CNT3	Worsening bladder Continence (LTCQ)			(.000) .34	(.044) .16
CNT4	Prevalence of urinary tract infections (CHSRA)	(.006) .22	(.003) .23	(.000) .28	(.004) .23
CNT5	Bladder incontinence – High risk (CHSRA)				
CNT5	Bowel incontinence – High risk (CHSRA)				(.055) -.21
CNT6	Bladder incontinence – Low risk (CHSRA)			(.000) .29	
CNT6	Bowel incontinence – Low risk (CHSRA)			(.000) .32	
INFX	Infections prevalence (MegaQI)	(.037) .16	(.059) .15	(.007) .21	(.004) .23
NUT1	Prevalence of feeding tubes (Ramsey)	(.000) .29	(.035) .17	(.000) .34	(.016) .19
BM1X	Low body mass index (BMI+) prevalence (MegaQI)	(.061) -.15			
WGT1	Weight loss prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)	(.013) -.20	(.024) .18	(.038) .16	
PAN1	Pain worsening (LTCQ)	(.012) .20			
PRU1	Severe ulcer prevalence – high & low (CHSRA)	(.094) .13	(.004) .23	(.004) .22	(.003) .24
PRU4	Worsening pressure ulcers (LTCQ)				
BURX	Burns, skin tears or cuts prevalence (MegaQI)			(.091) .13	(.003) .23
RES1	Physical restraints used daily (CHSRA)	(.000) .27		(.000) .30	(.002) .22
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)	(.003) .24	(.005) .22	(.000) .32	
DRG2	Prevalence of antipsychotic use – high			(.057) .28	

**Appendix Table Kc. Summary of Relationship Between Chronic Quality Indicators
and Responsive Validation Elements**

	risk (CHSRA)					
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)	(.020) .19	(.016) .19	(.000) .28		

Appendix Table Kc. Summary of Relationship Between Chronic Quality Indicators and Responsive Validation Elements

		DOCUMENTATION CHANGE EVALUATED WITHIN 72 HOURS	PHYSICIAN NOTIFIED OF DECLINE IN STATUS	THERAPIES NOTIFIED OF CHANGE IN STATUS	REFERRAL ORDER/CONSULT WITH SPECIALIST
ADL1	ADL Decline (CHSRA)				(.002) .24
ADL2	ADL decline following improvement (MegaQI)				(.000) .28
ADL3	ADL improvement in residents with capacity (MegaQI)				
MOB1	Locomotion worsening (LTCQ)			(.046) -.16	
WALX	Maintenance or improvement in walking (MegaQI)				
FAL1	Fall prevalence (LTCQ)	(.002) .24	(.000) .28		
COG1	Cognition worsening (LTCQ)	(.062) .15		(.044) .16	(.044) .16
COM1	Worsening communication (LTCQ)			(.077) .14	(.020) .18
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)				
BEH1	Behavioral symptoms – high & low risk (CHSRA)				
BEH2	Behavioral symptoms – high risk (CHSRA)				
BEH3	Behavioral symptoms – low risk (CHSRA)				
BEH4	Worsening behavioral Symptoms (LTCQ)				
MOD3	Depressed/Anxious mood worsening (LTCQ)		(.008) -.21		
SOC2	Little or no activity – prevalence (CHSRA)				
CAT1	New insertion of indwelling catheter (LTCQ)	(.034) .17	(.040) .16		
CAT2	Prevalence of indwelling catheter (CHSRA)	(.064) .15			
CNT1	Bladder incontinence (CHSRA)			(.000) .29	
CNT1	Bowel incontinence (CHSRA)				
CNT2	Worsening bowel continence (LTCQ)				
CNT3	Worsening bladder Continence (LTCQ)			(.059) .15	
CNT4	Prevalence of urinary tract infections (CHSRA)	(.060) .15	(.028) .17		
CNT5	Bladder incontinence – High risk (CHSRA)				
CNT5	Bowel incontinence – High risk (CHSRA)				(.047) -.22
CNT6	Bladder incontinence – Low risk (CHSRA)			(.092) .13	
CNT6	Bowel incontinence – Low risk (CHSRA)				
INFX	Infections prevalence (MegaQI)	(.017) .19	(.016) .19		
NUT1	Prevalence of feeding tubes (Ramsey)	(.058) .15			
BM1X	Low body mass index (BMI+) prevalence (MegaQI)				
WGT1	Weight loss prevalence (LTCQ)				
PAIX	Inadequate pain management (MegaQI)				
PAN1	Pain worsening (LTCQ)				(.002) .24
PRU1	Severe ulcer prevalence – high & low (CHSRA)	(.011) .20	(.059) .15	(.034) .17	(.000) .28
PRU4	Worsening pressure ulcers (LTCQ)				

Appendix Table Kc. Summary of Relationship Between Chronic Quality Indicators and Responsive Validation Elements

BURX	Burns, skin tears or cuts prevalence (MegaQI)	(.006)	.22	(.000) .29	(.033)	.17	
RES1	Physical restraints used daily (CHSRA)	(.004)	.20	(.000) .28			
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)			(.080) .14	-		
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)						
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)						

Appendix Table Kc. Summary of Relationship Between Chronic Quality Indicators and Responsive Validation Elements

		TREATMENT IN PLACE
ADL1	ADL Decline (CHSRA)	
ADL2	ADL decline following improvement (MegaQI)	
ADL3	ADL improvement in residents with capacity (MegaQI)	
MOB1	Locomotion worsening (LTCQ)	
WALX	Maintenance or improvement in walking (MegaQI)	
FAL1	Fall prevalence (LTCQ)	(.002) .24
COG1	Cognition worsening (LTCQ)	(.047) .16
COM1	Worsening communication (LTCQ)	
DELX	Failure to prevent delirium or reoccurrence of delirium (MegaQI)	
BEH1	Behavioral symptoms – high & low risk (CHSRA)	
BEH2	Behavioral symptoms – high risk (CHSRA)	
BEH3	Behavioral symptoms – low risk (CHSRA)	
BEH4	Worsening behavioral Symptoms (LTCQ)	
MOD3	Depressed/Anxious mood worsening (LTCQ)	
SOC2	Little or no activity – prevalence (CHSRA)	
CAT1	New insertion of indwelling catheter (LTCQ)	
CAT2	Prevalence of indwelling catheter (CHSRA)	(.033) .17
CNT1	Bladder incontinence (CHSRA)	
CNT1	Bowel incontinence (CHSRA)	
CNT2	Worsening bowel continence (LTCQ)	
CNT3	Worsening bladder Continence (LTCQ)	(.068) .15
CNT4	Prevalence of urinary tract infections (CHSRA)	(.011) .20
CNT5	Bladder incontinence – High risk (CHSRA)	
CNT5	Bowel incontinence – High risk (CHSRA)	
CNT6	Bladder incontinence – Low risk (CHSRA)	
CNT6	Bowel incontinence – Low risk (CHSRA)	
INFX	Infections prevalence (MegaQI)	(.014) .19
NUT1	Prevalence of feeding tubes (Ramsey)	(.008) .21
BM1X	Low body mass index (BMI+) prevalence (MegaQI)	
WGT1	Weight loss prevalence (LTCQ)	
PAIX	Inadequate pain management (MegaQI)	
PAN1	Pain worsening (LTCQ)	
PRU1	Severe ulcer prevalence – high & low (CHSRA)	(.001) .25
PRU4	Worsening pressure ulcers (LTCQ)	
BURX	Burns, skin tears or cuts prevalence (MegaQI)	(.003) .24
RES1	Physical restraints used daily (CHSRA)	(.002) .22
DRG1	Prevalence of antipsychotic use – high & low risk (CHSRA)	
DRG2	Prevalence of antipsychotic use – high risk (CHSRA)	
DRG3	Prevalence of antipsychotic use – low risk (CHSRA)	

Appendix Table Kd. Relationship Between Post Acute Quality Indicators and Responsive Validation Elements

		DOCUMENTATION OF COMPREHENSIVE ASSESSMENTS		ASSESSMENT BY PHYSICIAN	
ADL1- PAC	Failure to improve during early post-acute period	(.027) .17	(.023) .32	(.005) .22	
DELX- PAC	Failure to improve and manage delirium (pilot)		(.040) .28		

		EVIDENCE OF PROBLEM/ISSUE (OTHER THAN CARE PLAN OR MDS)		DOCUMENTATION OF CHANGE IN RESIDENT STATUS	
DELX- PAC	Failure to improve and manage delirium (pilot)		(.070) .25		
PAIX- PAC	Inadequate pain management (pilot)			(.093) .13	

		DOCUMENTATION CHANGE EVALUATED WITHIN 72 HOURS		PHYSICIAN NOTIFIED OF DECLINE IN STATUS	
PAIX- PAC	Inadequate pain management (pilot)			(.042) .15	

		THERAPIES NOTIFIED OF CHANGE IN STATUS		REFERRAL ORDER/CONSULT WITH SPECIALIST	
		(.029) .17			
DELX- PAC	Failure to improve and manage delirium (pilot)			(.093) .13	
CNTX- PAC	Improve bladder continence	(.061) .15			
PAIX- PAC	Inadequate pain management (pilot)	(.000) .28	(.046) .27	(.000) .28	(.012) .34